249/7

POSITION	INITIALS	IF 40.	DATE
FEE DETERMINATION O.I.P.E. CLASSIFIER	. N.A	: 11/	ighpiloi
FORMALITY REVIEW	DE	1-11.	10 20 01
RESPONSE FORMALITY REVIEW	7/-	1667	4/65/84
		. 79.67	. Car as it is
INDEX OF CLAIMS			
∨	Rejected	N .	. Non-elected
- (Through numeral	Allowed Canceled	1	. Interference
÷	Restricted	0	Otijected
Claim : Date	Claim	Date	Claim Date
4)/ve/			
Final County	Final		Final
	51	+++++++	301
00	52	+ + + + + + + + + + + + + + + + + + + +	100-
30	53		103
5/	54 55		105
	56	·	(0)
97	57		10:
00	59	++++	109
90	60	+	410
	61		111
12	62		n.
13/	63	+++++	113
15	65	 	115
16	66		1:0
17 18	67		11/2
19	69		
20	70		1.0
21	71		
22 23	72	+	
124	74		
25	75		1.5
26	76		1.6
27	78		127
29	79		129
30	60		130
31	82		131
33	83	~ ·	133
34	84		334
35			135
	8:		13.
38	89		138
39	8.4		737
4(i			349
42	62		:42
43	53		143
4.4	14		145
. 45) 			145
47			7.3
48	JR .	<u> </u>	
149	75	• • • • •	*4.4 **********************************
***	1959		-

If more than 150 claims or 10 actions staple additional sheet here

LEFT INSIDE